

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *A. G. McIntyre*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *St. John N.B.*
- 3. What is the name of your next-of-kin?..... *Mrs. J. McIntyre (Mother)*
- 4. What is the address of your next-of-kin?..... *Harlow H. Lancaster*
- 5. What is the date of your birth?..... *Oct 28 1895*
- 6. What is your Trade or Calling?..... *St. John*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated?..... *yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *Grand Regt. yes*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes*
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *yes*

A. G. McIntyre (Signature of Man).
Ray W. Henderson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

Harold S. McIntyre....., do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Nov 24* 1914. *A. G. McIntyre* (Signature of Recruit)
Ray W. Henderson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Harold S. McIntyre....., do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Nov 24* 1914. *A. G. McIntyre* (Signature of Recruit)
Ray W. Henderson (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *St. John* this *24* day of *Nov* 1914.

J. H. Elliott (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

J. H. Elliott (Approving Officer)

Description of Harold Gordon Watson Enlistment.

Apparent Age 19 years 1 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 6 ins.

Chest measurement { Girth when fully expanded 34 1/2 ins.
 Range of expansion 4 1/2 ins.

Complexion light

Eyes Blue

Hair light

Religious denominations. { Church of England.....
 Presbyterian Yes.....
 Wesleyan.....
 Baptist or Congregationalist.....
 Other Protestants.....
 (Denomination to be stated.)
 Roman Catholic.....
 Jewish.....

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date Nov 24 1914.

Place St John

L R Murray
 Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

H. G. M. McIntyre having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Lt Col
 (Signature of Officer)

Date Nov 24 1914.

Command of 26 Batta

REGIMENTAL DOCUMENTS

15-4-19
mhw

NAME *Sergeant* **MCINTYRE HAROLD, GORDON** REGT. NO. **69681** UNIT **D. D. #7** H. Q. FILE NO.

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

- 24 ATTESTATION PAPER (M.F.W. 23, 133, or 51) *1*
- 3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 2x FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 2 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 3 *Misc*
- 1 *Recd*
- 1 *Pass card*
- 1 *R12*
- 1 *Pay Card*

Ret 9-12-19

M

18536

DEATH

Category

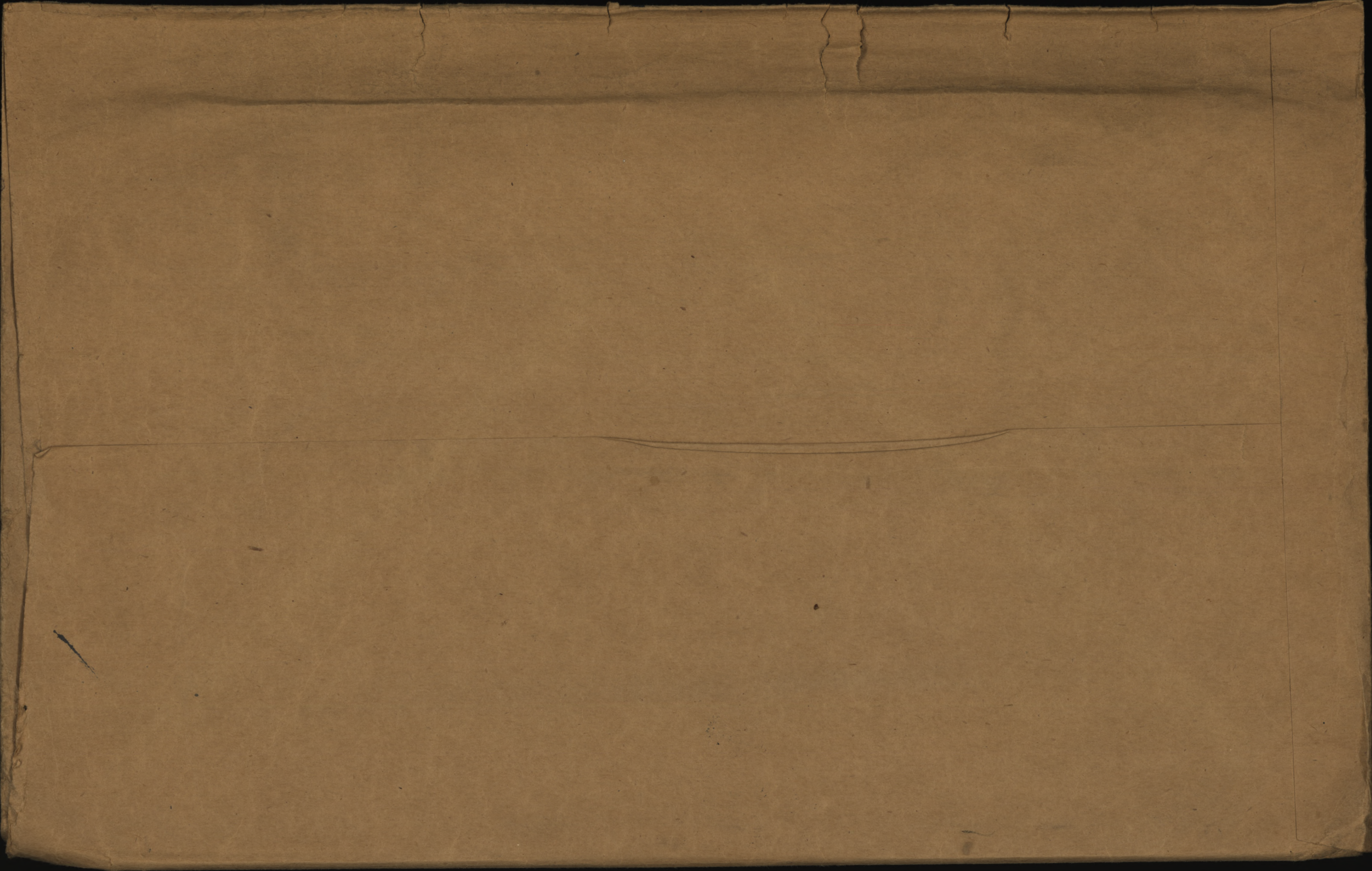
DISCHARGE

Category

Demob

DESERTION

H



Dental Examination on Discharge

File No.....

Rank **Sergt** Name **McIntyre. H.G.** Regt. No. **69681**

Date of enlistment **24-11-14.** Service, where **France.**

If any dental treatment in army, where **France.**

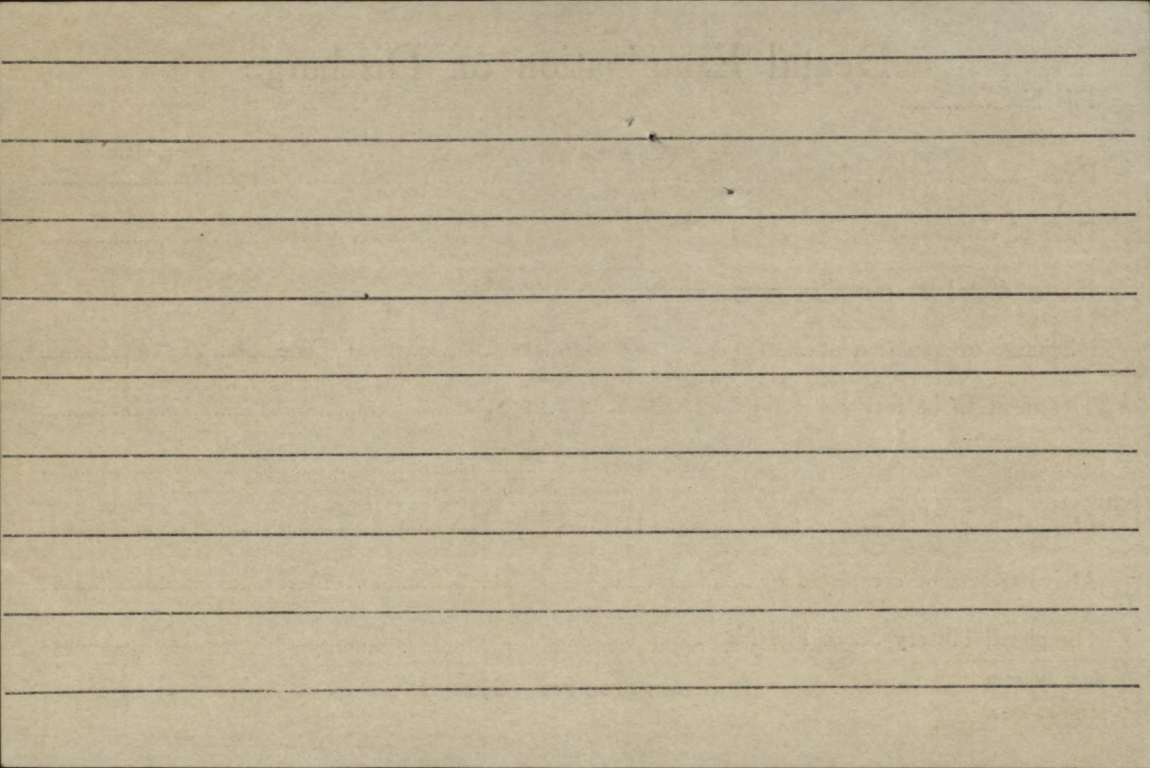
Discharge examination at **St John. N.B.** Date **13-3-19.**

Treatment to be received **Fillings. 11-29.**

At **St John. N.B.** Examined by *A.W. Turner*

Above treatment completed by..... Date.....

Completed History Sheet File No.....



No. 549

RANK Pte.

NAME Mc Intyre H.

69681 mar. paylist

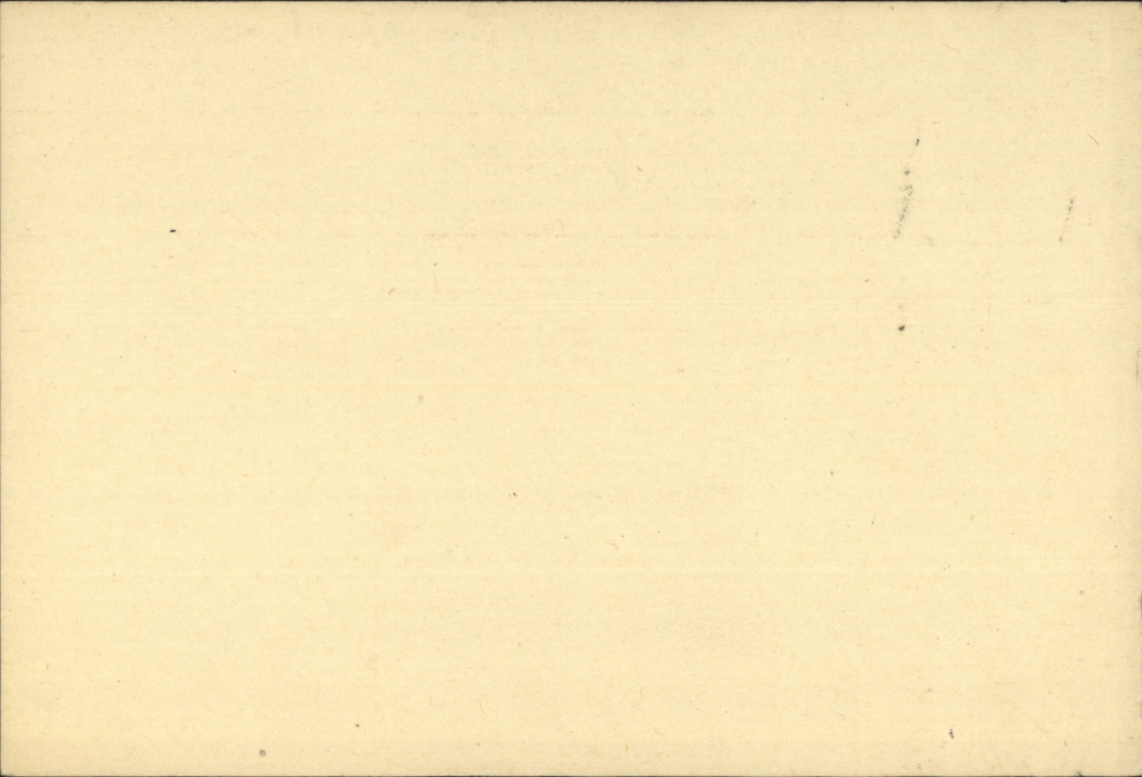
T. O. S. 24/11/14 to 0.4, 30/11/14 UNIT 26th Bn.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov. 24 th	Nov. 30 th	✓		
Dec-		✓		
1915				
Jan-		✓		
Feb-		✓		
Mar-		✓		
April.		✓		
May.		✓		
June.		✓		
July		✓	Profits 2 days pay 8-7-15	July paylist.

UNIT SAILED

JUN 13 1915



Number

69681

Rank

Sgt

Surname

MCINTYRE

Christian Name

Harold Gordon

Units

26th Bn Can Inf Theatre of War France

Date of Service

15-9-15

Remarks

310 Prince Edward St.

Latest Address

St Johns
Y.P.O. W.B.

Roll No

200m. 2-21 M.

"B" Page 10425.

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date	Remarks

DESP MAR 17 1920
REGN. NO. 22780

*—Name will be given in full; surname first.

SURNAME.

McIntyre

CHRISTIAN NAMES

Harold Gordon

REGL. NO.

69681

RANK

Pte

UNIT

26th

FORMER CORPS

62nd. Regt. 2 yrs.

NEXT OF KIN.

NAMES IN FULL

McIntyre Mrs. Joseph

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Havelock St. West St. John N.B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada St. John N.B.

DATE

Oct. 28th 1895

PLACE OF ATTESTATION

St. John N.B.

DATE

Nov. 24th 1914

*of s. 15/6/15 - 115
26*

*R16. 25/2/19 270
93 Sgt.*

7

CARD NO.

*SSS Disc 14/3/19
D.O. 77/18/3/19
FOLL.
R.O. 142016
#750
Bn.*

From Halifax Per. S.S. "Caledonia" 15-6-15

MARRIED

SINGLE *Yes.*

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

19. YEARS

1. MONTHS

HEIGHT

5. FEET

6. INCHES

CHEST MEASUREMENT

34 1/2 INCHES

EXPANSION

4 1/2 INCHES

COMPLEXION

Light

EYES

Blue.

HAIR

Light.

DISTINGUISHING MARKS

Not Stated.

MEDICAL EXAMINATION.

PLACE

St. John N.B.

DATE

Nov. 24th 1914.

Present Address

Not Stated.

NAME

McIntyre H. G.

RANK AND CORPS

Pte. 26th Bn.

REG'TL. No.

69681

H. Q. FILE No. 649

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A490-2 Rep. from MBasets Hosp 28-3-17 NYD.
A490-2 Rep. from Basets duty 29-3-17 " "

Local

Name *W. L. Lintye Navelock Gordon* Rank *Sgt* Regtl. No. *69681*

Original unit *26 B Co* Present unit *D.S.C. 2571* M. or S. Age *19* Religion *Pres* Fyle Depot Ref. H.Q.

Port, ship and date of arrival *4th Div. Camp of Britain 25-2-19*

Next of kin *Wife Mrs Jas W. Lintye Navelock St Lane. W. 1/4*

Address on leave *As above*

Address on discharge *As above*

Transportation issued Yes No Date Character on discharge

Previous occupation *Salvagee* Date and place of enlistment *St John 25/10/24 1917*

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
<i>T. O. S.</i>		
<i>17-2-19</i>	<i>Posted to Dispersal Station 25-2-19</i>	<i># 60</i>
<i>14-3-19</i>	<i>Discharged from D.M.S</i>	<i># 77</i>

Name will be given in full ; surname first.

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

Surname	Christian Name or Names	Reg. No.
Mc Intyre.	H.G.	69681.
Rank	Unit	Troop Batty.
Pte.	26th. Bn.	
Hospital		Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

nyd.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

U.L. 17-4-17. A/490. ✓

REMARKS

R.F.Base. to. Hospt.

28-3-17.

To. Duty. 29-3-17.

Observed 17.

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

ORIGINAL.

MEDICAL HISTORY SHEET. A Co.

Surname McIntyre Christian Name Harold G.

Examined { on <u>24th</u> day of <u>Nov.</u> 191 <u>4</u> at <u>St John N.B.</u> Birthplace { City or Town <u>St John N.B.</u> County <u>St John</u> Apparent age <u>19 yrs 1 mo.</u> Trade or occupation <u>Teamster.</u> Height <u>5</u> Feet <u>6</u> Inches. Weight <u>140</u> Lbs. Chest measurement { Minimum <u>36</u> inches. Maximum expansion <u>34½</u> inches. Physical development <u>Good</u> Small-Pox Marks <u>None</u> Vaccination Marks { Arm Right. Left. Number <u>3</u> When Vaccinated last <u>Childhood</u> (a) Marks indicating congenital peculiarities or previous disease <u>Scar on left Groin</u> (b) Slight defects but not sufficient to cause rejection	Approved by <u>L.M.Curren.</u> Rank <u>Captain A.M.C.</u> M.O. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Date</th> <th style="width: 15%;">Fit or Unfit</th> <th style="width: 70%;">EXAMINED FOR RE-ENGAGEMENT,</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Date</th> <th style="width: 15%;">Result</th> <th style="width: 70%;">VACCINATIONS.</th> </tr> </thead> <tbody> <tr> <td><u>1/2/15</u></td> <td> </td> <td><u>T E Bishop</u> M.O.</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Date</th> <th style="width: 15%;">Result</th> <th style="width: 70%;">ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> </thead> <tbody> <tr> <td><u>15/1/15</u></td> <td> </td> <td><u>T E Bishop</u> M.O.</td> </tr> <tr> <td><u>225/1/15</u></td> <td> </td> <td><u>T E Bishop</u> M.O.</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,																						Date	Result	VACCINATIONS.	<u>1/2/15</u>		<u>T E Bishop</u> M.O.																Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	<u>15/1/15</u>		<u>T E Bishop</u> M.O.	<u>225/1/15</u>		<u>T E Bishop</u> M.O.									
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Enlisted on 24th day of November 1914 at St John N.B.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>26th Battalion</u>	<u>69681</u>	<u>Good</u>	<u>24/11/14.</u>
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 69681 Rank Sgt. Name J. McIntyre H. G.
(Surname first)
Unit who was* Disc
On 14-3-19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-3-19 to 14-3-19 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	21.24	
Regimental Pay..... 14 days at \$ <u>1.40</u> c.		19.60
Field Allowance..... 14 days at \$ <u>10</u> c.		1.40
Separation Allowance		35.00
Clothing Allowance		72.61
Post Discharge Pay		
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges <u>C. W. V.</u>	2.37	
Balance on transfer or on discharge, cheque No. <u>10106.</u>	105.00	
Total	<u>128.61</u>	<u>128.61</u>

*Give particulars.

A monthly stoppage of \$ 20.00 (†) has been paid (‡) been paid on account of
Assigned Pay for the month of Feb. 191..... }
and Separation Allee. for month of 191..... } (to) Assignee Mrs. J. McIntyre
(Address) Havelock St. W. St. John N.B.
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.

REMARKS:—

- State (1) date of enlistment married or single.....
(2) Separation Allowance, entitled or not no (3) Reason for discharge Went on
(4) Authority for discharge or transfer W. L. # 7

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 13-3-19
Place St. John

W. L. # 7 Captain
Paymaster District Depot No. 7
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Table with columns: Date, Place, Cheque No. A.R. No. or Other Particulars, AMOUNT (Dr., Cr.), Signature of Officer Making Payment.

Vertical text on the left side of the page, possibly a list or index of entries.

ON TRANSFER OF AN OFFICER
Other Allowance of \$
REMARKS
NOTE - A & A.R. Card and Index Card (M.F.V.) are to accompany this statement.

W. S. Badge - Class 17 N.O.

*Certified Correct
Loan Records
Army Form B. 103.
101/30/26/4*

Casualty Form—Active Service.

Regiment or Corps *26th Battalion 2nd C.E.F.*

Regimental No. *69681* Rank *Pte* Name *McIntyre H. G.*

Enlisted (a) *24-11-14* Terms of Service (a) *Duration of War* Service reckons from (a) *24-11-14*
and for 6 mos after Termination

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<i>22.12.16</i>	<i>26th C.E.F.</i>	<i>Disembarked</i>	<i>Boulogne</i>	<i>15-9-15</i>	
<i>5-1-17</i>	<i>✓</i>	<i>On 10 days leave</i>	<i>Field</i>	<i>17.12.16</i>	<i>B 213 P.T.O. I. 2/17</i>
<i>31/2/17</i>	<i>do</i>	<i>from</i>	<i>✓</i>	<i>27.12.16</i>	<i>✓ Dec. 27 2/16-1-17</i>
<i>do</i>	<i>do</i>	<i>Sick to F.A.</i>	<i>do</i>	<i>28 3/17</i>	<i>B 213 Dec. 28 9/10 3/17</i>
<i>do</i>	<i>do</i>	<i>rejoined Unit</i>	<i>do</i>	<i>29.3.17</i>	<i>do do</i>
<i>18.9.17</i>	<i>do</i>	<i>on Anti-air craft</i>	<i>do</i>	<i>9.9.17</i>	<i>B 213.</i>
<i>22.9.17</i>	<i>do</i>	<i>W. Gun Course</i>	<i>do</i>	<i>16.9.17</i>	<i>B 213</i>
<i>22.9.17</i>	<i>do</i>	<i>rejoined Unit</i>	<i>do</i>	<i>15-8-17</i>	<i>B 213. P.T. 2. Ord. 99-17</i>
		<i>Promoted Corporal</i>	<i>do</i>		
		<i>vice 69893 Cpl</i>			
		<i>Sawden, J.D. apptd</i>			
		<i>L/Sgt</i>			
<i>1.12.17</i>	<i>do</i>	<i>to 2nd Corps School</i>	<i>do</i>	<i>25.11.17</i>	<i>B 213</i>
		<i>(W. Gun Course)</i>			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
19.12.17	66 Pm	Rejoined Unit.	Field	23.12.17	B213.
29.12.17	"	14 days leave	"	29.12.17	B213. P. 2.
19.1.18	"	From	"	15.1.18	"
5/1/18	"	Promoted Sgt. vice 70050 Sgt. Wright, H. G. to Eng.	"	1.12.17	B213. P. 2. O. 5.18/18
23.2.18	"	attached as Instructor to 2nd Divl. Wing C.C.B.	"	16.2.18	B213 (C.C.B. C. 1. 1810/13/18 K.R. 18/6830)
2.7.18	C.C.B.	Serving with C.C.B.	"	2.7.18	K.R. 19/14108.
2.11.18	5th Pm. C.C.	attd to 5th Pm. C.C. for ration & instructional duties	"	1.11.18	B213.
6.1.19	C.C.B.	at England posted to New B. Regt Depot	Witley	9/1/19	at B

Chas B. Kapriel

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E.

-1-19 Comp. B. 30
C.R.A.

Census to be attached from
Can. Inf. Base Depot on pro-
ceeding to H.D. No.
Kimmel park, Rhyl

Bordon 31-1-19 B.O. No. 31

W. G. Wessitt
Lieut. & Asst. Adjutant,
for Lt.-Colonel, Commanding,
Composite Brigade, C. R. A.

Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1773-39-9:0.

Casualty Form—Active Service.

Unit, Regiment or Corps 26th Bn.

Regimental No. 69681 Rank Sgt. Name Mr. Latyse, Harold Gordon
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>17-2-19, O. M. F. C.</u>		TAKEN ON STRENGTH PART II. ORDER No. 60	<u>District Depot No. 7.</u> <u>John N. B.</u> <u>For O. C. District Depot No. 7.</u>		<u>Lieut. & Asst. Adjt.</u>
<u>14-3-19.</u>		STRUCK OFF STRENGTH PART II. ORDER No. 77	<u>District Depot No. 7.</u> <u>John N. B.</u> <u>For O. C. District Depot No. 7.</u>		<u>Lieut. & Asst. Adjt.</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form - Active Service

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
---	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	

Initials and Rank of
an Officer.

(Authority)

(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(18) Demobilizer (f)	(Place)	(Signature of
(19) Pivotal-man (f)	(20) Qualifications (g)	(Date)	Posting Officer
		or (21) Corps trade and rate	

(22) Extended }	(23) Re-engaged }
-----------------	-------------------

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W.1889—PP.11.50 1M 5/18 G.W.P.Co.(3490)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

1219 Oka

17-2-19 MD7

32
49. Stewart Hunt. Lieut.
MD7.

MAIL EMPRESS OF BRITAIN.

SAILED
FEB 17 1919
ARRIVED
FEB 25 1919

25' 2' 19-OVERSEAS
708 D. D. NO 7. F. TON N. B.
308 D. D. NO 7 ST JOHN N. B.

FEB 17 1919

DISPERSAL STATION, ST. JOHN, N. B.
FOR O. C., DISTRICT DEPOT No. 7

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 69681 (Rank) Sgt.

Name (in full) McIntyre, Harold Gordon enlisted in
the 26th Btn.

CANADIAN EXPEDITIONARY FORCE at St. John, N.B. on the 21
day of Nov. 19 14

HE served in Canada England France
and is now discharged from the service by reason of Demobilization

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 19 yrs. 1 mth

Marks or Scars Nil

Height 5' 6"

Complexion Light

Eyes Blue

Hair Light

H. McIntyre

Signature of Soldier

R. W. Coft

Issuing Officer

DISPERSAL STATION, ST. JOHN, N. B. FOR

O. G. DISTRICT DEPOT #7

O. C.

Rank

Date of Discharge 14/3/19

Signed at St John N.B. this 14th day of March 19 19

Appointment

in Military District No. 7

File Reference No. _____

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline as if on the strength of a unit.

CLASS A WAR SERVICE BADGE NO. 79340

Rank *Plt* Name **McINTYRE H.G.** Reg'l No. 69681
 Unit **26th BN.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**

Place and Date of Enlistment **St John.N.B. 24th Nov.1914.** Place of Birth **St John.N.B.**

Name and Address, Next-of-Kin **Mrs Jas McIntyre, Havelock St, Lancaster West St John. N.B.**

Relationship **Mother**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

2821
 N.E. R.B. No.
 File R.L.
 Category
Law

Discharge, Date and Place Reason Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents ✓
Date	From whom received				
		Arrived in England per S.S. Caladonia		24.6.15.	
10.8.15 19 SEP 1915	O.C. 26th	Infirmary 4 days pay. A.W.H. C. Landing.		10.8.15	Pr. II O.#41
		Embarked for France.	Folkestone	15.9.15	Emb. memo #288
17.4.17	O.C. 26th	Rept'd from Base to Hosp'l	In field	28.3.17	OHA HQO NYD
do.	do	Rept'd from Base to Duty	do	29.3.17	" - HQO NYD
4-10-17	✓	Promoted Cpl	✓	15.8.17	Pr. II 99
18-1-18	✓	Prom Sgt.	cpl	1-12-17	✓ 5
17.1.19	"	Sp. to Eng. & posted to N.B.R.D.	Sgt.	9.1.19	✓ 4
23.1.19	Comp. Pde. C.R.A.	Att'd from C.G.B.D. France	"	Borden	6.1.19 ✓ 23
7.2.19	N.B.R.D.	P.O. France to C.R.A. Borden	"	Repton	8.1.19 - 24

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
10-2-19	N.B.R.D. Ceased to be attached to CARD & is S.O.S. on file to C.C.P. in Canada		Sgt. Ripon		Att. O. 26
18-2-19	No. 7 M.D.C. Wing S.O.S. to Canada		Sgt Rhyl	17-2-19	Pt II 49

Rank

1st

Name **MCINTYRE H.G.**

Reg'l No. **69681**

Unit

26th BN.

If in perm. Corps,
What Unit?

Married or Single **Single.**

Place and Date of Enlistment **St John, N.B. 24th Nov. 1914.**

Place of Birth **St John, N.B.**

Name and Address, Next-of-Kin **Mrs Jas McIntyre, Havelock St, Lancaster West St John, N.B.**

Relationship **Mother**

Assigned Pay Monthly \$ **20.**

Payable to **Mrs Joseph McIntyre, Havelock St. W. St John, N.B.**

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
July 1	July 31	31	1	31	31	10	310	5	3910			5	20	220	2720	1190	Sub from prev. pay. 2 days forfeit.	
" 1	" 31	Adjustment						13	1203									
Aug 1	Aug 31	31	1	31	31	10	310		3410			487	20	440	2927	1686	Forfeit 4 days pay	
Sept 1	Sept 30	30	1	30	30	10	3		33			179	20		2179	2807		
Oct 1	Oct 31	31	1	31	31	10	310		3410			611	20		2611	3606		
Nov 1	Nov 20	20	1	20	20	10	2		23			268	20		2268	4638		
Dec 1	Dec 31	31		31	31		310		3410			1238	20		3238	4810		
1916 Jan 1	Jan 31	31		31	31		310		3410			523	20		2523	5697		
Feb 1	Feb 29	29		29	29		290		3190			542	40		2542	6365		
Mar 1	Mar 31	31		31	31		310		3410			462	40		2523	7252		
		275			2750			5	1330763	4851180			66023511					

MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 60m.—12-15.
 1772—39—819.

OVERSEAS CONTINGENTS

Sheet No. 2.

Name of Soldier

L. L. Job 89002.—Req. 6219

PAYMENTS.

McIntyre, A. J.
Co. 26 Batta.

Month.	Year.	Cheque No.	Amt.	Remarks.
				\$ 20 ⁰⁰ / _{xx}
April	1916	K 2548	20	
May		L 4952	20	
June		D 3168	20	
July		I 10140	20	
Aug.		C 12096	20	
Sept.		Q 19063	20	
Oct.		2 23781	20	
Nov.		M 25922	20	
Dec.		7 33585	20	
Jan.	1917	C 41291	20	
Feb.		C 46400	20	
March		U 47327	20	20.00
April		R 3510	20	20.00
May		K 10789	20	20.00
June		Q 15405	20	Mc
July		R 23363	20	D
Aug.		E 80772	20	
Sept.		Z 39599	20	lu
Oct.		J 43840	20	
Nov.		W 49678	20	
Dec.		S 59986	20	
Jan.	1918			
Feb.				6.00
March				
April				
May				
June				
July				

ppa

ppa

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819.

To Whom *Mrs. Joseph McIntyre*
Address *Havelock St., Lancaster*
West, St. John *M.B.*

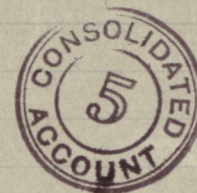
By Whom Assigned *McIntyre, H. G.*
Regtl. No. *69681*
Rank *Pte*
Corps *"A" Coy. 26th Batt*

Rate *\$ 20⁰⁰/₁₀₀*

JUN 1 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		<i>R1584</i>	<i>20 00</i>	
July		<i>Q4250</i>	<i>20 00</i>	
✓ Aug.		<i>Q5037</i>	<i>20 -</i>	
Sept.		<i>R7401</i>	<i>20 -</i>	
Oct.		<i>R8649</i>	<i>20 60</i>	
Nov.		<i>217988</i>	<i>20</i>	
Dec.		<i>V9182</i>	<i>20</i>	
Jan.	1916	<i>X9025</i>	<i>20 -</i>	
Feb.		<i>Y12053</i>	<i>20</i>	
March		<i>K 16182</i>	<i>20</i>	



154

1001
1002
1003

1004
1005
1006

1007

MARRIED OR SINGLE *S.*
 PLACE OF BIRTH *St John, N.B.*
 NAME AND ADDRESS OF NEXT OF KIN *McIntyre, Mrs James*
Havelock St. W. St John, N.B.
 RELATIONSHIP OF NEXT OF KIN *Mother.*
 NAME AND ADDRESS OF NEXT OF KIN

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Promoted Cpl.</i>	<i>15/3/17</i>	<i>DD. # 99. 4/4.10.17.</i>
<i>Promoted Sergeant</i>	<i>1.12.17</i>	<i>DD. 5-12.1.18</i>

REG'L No. *69681* RANK *Sergeant* NAME *McIntyre, H.G.*
 IF IN PERM. CORPS | UNIT *26 Bn* TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 WHAT UNIT |
 PERMANENT FORCE ALLOWANCES _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 PLACE OF ATTESTATION *St John N.B.* TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 DATE OF ATTESTATION *24th Nov. 1914* TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 ASSIGNED PAY MONTHLY \$ *20.20* DATE EFFECTIVE *1.7.15.*
 PAYABLE TO *Mrs J. McIntyre Havelock St W. St John N.B.* RELATIONSHIP _____

RELATIONSHIP OF NEXT OF
 SEPARATION ALLOWANCE MONTHLY \$ _____ EFFECTIVE (DATE) _____
 PAYABLE TO _____
 RELATIONSHIP OF DEPENDANT _____

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____
 PAYABLE TO _____ RELATIONSHIP _____
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) _____ EFFECTIVE _____ REASON _____
 DISCHARGE DATE AND PLACE _____ REASON AND AUTHORITY _____
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) _____
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) _____

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4					CREDIT	DEBIT							
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE												
			<i>275</i>				<i>2750</i>						<i>5/3</i>		<i>30763</i>					<i>4851</i>		<i>180</i>		<i>660</i>	<i>23511</i>	<i>7257</i>									
<i>Apr. 30</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>							<i>33</i>		<i>736</i>	<i>8/4</i>	<i>771</i>	<i>24/4</i>	<i>261</i>	<i>262</i>	<i>20</i>	<i>-</i>	<i>2523</i>	<i>8029</i>										
<i>May 31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>							<i>34</i>	<i>10</i>	<i>823</i>	<i>8/5</i>	<i>868</i>	<i>24/5</i>	<i>255</i>	<i>256</i>	<i>20</i>	<i>-</i>	<i>2511</i>	<i>8928</i>										
<i>June 30</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>							<i>33</i>			<i>9/2</i>	<i>96</i>			<i>255</i>	<i>-</i>	<i>2255</i>	<i>9973</i>											
<i>July 31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>							<i>34</i>	<i>10</i>	<i>950</i>	<i>23/6</i>	<i>992</i>	<i>19/7</i>	<i>256</i>	<i>262</i>	<i>20</i>	<i>-</i>	<i>2518</i>	<i>10865</i>										
<i>Aug 31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>							<i>34</i>	<i>10</i>	<i>1035</i>	<i>24/7</i>	<i>1057</i>	<i>13/8</i>	<i>261</i>	<i>262</i>	<i>20</i>	<i>-</i>	<i>48</i>	<i>2571</i>	<i>11704</i>					<i>Issue on repayment 0.8.2.7/7/16</i>				
<i>Sept 30</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>00</i>							<i>33</i>	<i>00</i>	<i>1128</i>	<i>31/8</i>	<i>1226</i>	<i>8/10</i>	<i>261</i>	<i>262</i>	<i>20</i>	<i>-</i>	<i>15</i>	<i>2276</i>	<i>12728</i>					<i>Issue on repay 10/8</i>				
<i>Oct 31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>							<i>34</i>	<i>10</i>	<i>1167</i>	<i>25/9</i>	<i>1219</i>	<i>5/10</i>	<i>261</i>	<i>262</i>	<i>20</i>	<i>-</i>	<i>174</i>	<i>2959</i>	<i>13179</i>									
<i>Nov 20</i>	<i>20</i>		<i>20</i>	<i>20</i>		<i>2</i>								<i>33</i>		<i>249</i>	<i>24/10</i>			<i>261</i>		<i>20</i>		<i>2261</i>	<i>14218</i>										
<i>Dec 31</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3</i>	<i>10</i>							<i>34</i>	<i>10</i>	<i>1383</i>	<i>29/11</i>	<i>1333</i>	<i>16/11</i>	<i>261</i>	<i>261</i>	<i>20</i>	<i>20</i>	<i>2542</i>	<i>15086</i>			<i>15086</i>		<i>Issue on Repay 21/11/16.</i>					
<i>1917.</i>			<i>55</i>				<i>5500</i>																												
<i>Jan 31</i>	<i>31</i>	<i>1</i>	<i>34</i>	<i>10</i>										<i>34</i>	<i>10</i>	<i>1462</i>	<i>9/12</i>	<i>1441</i>	<i>2/12</i>	<i>1552</i>	<i>6/1</i>	<i>1463</i>	<i>14/12/14.</i>	<i>1582</i>	<i>16/12/14.</i>	<i>959</i>	<i>523</i>	<i>523</i>	<i>9733</i>	<i>20</i>		<i>13738</i>	<i>4758</i>	<i>4758</i>	
<i>Febr 28</i>			<i>30</i>	<i>80</i>			<i>3070</i>							<i>30</i>	<i>80</i>	<i>164</i>	<i>29/1</i>			<i>261</i>		<i>20</i>		<i>53</i>	<i>2314</i>	<i>5524</i>			<i>5524</i>		<i>DD. W. 2069. 31-1-17</i>				
			<i>66990</i>										<i>513</i>		<i>67503</i>					<i>8932</i>	<i>2344</i>	<i>9907</i>	<i>400</i>	<i>660</i>	<i>1366</i>	<i>61979</i>									

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- 1st July 1915		EFFECTIVE DATE:-	
AMOUNT:- 20 ⁰⁰		AMOUNT:-	

NAME:- *M^cINTYRE, A* *g*

NUMBER:- 69681

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
B.O.5 d/12-1-18	1-12-17	Sergeant,

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

*Mrs. J. McIntyre,
Havelock St. W. St. John, New Brunswick
Stopped to effect 1/2/19*

UNIT AND TRANSFERS

ORIGINAL UNIT:- *26th Bn*

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F D	UNIT TRANSFERRED TO
			<i>Canada</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
6/1/19	862	Field Hoses	7/16 ✓				
17/1/19	2968	C.R.A	£2-0-0 ✓				
17/1/19		London	£25-0-0 ✓				
27/1/19	3733	C.R.A	£5-0-0 ✓				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	135	15		

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Discharged to Canada 27/1/19 Aubrey Borden N.R. 2409 27/1/19 Borden*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar	Balance forward								4824	Nil	
April	Sgts Pay	45		Can. Ass. Pay				20	6610		
				5MAR67 C.L.P.C. 5-4-18	714						
May	Sgts Pay	45	46.50	Can. Ass. Pay				20			
				AR276 C.L.P.C. 27-4-18	625						
				✓ 427 ✓ 16-5-18	714						
				✓ 525 ✓ 27-5-18	625				7296		
June	Sgts Pay	45	46.50	Can. Ass. Pay				20			
				AR639 2nd C.C.R.C. 10/6	535						
				✓ 786 ✓ 17/6	714						
				✓ 950 ✓ 24/6	357				8190		
July	Sgts Pay	45	46.50	Can. Ass. Pay				20			
				AR1025 2nd C.C.R.C. 4/7	714						
				✓ 1226 ✓ 11/7	714						
				✓ 1369 ✓ 18/7	714				8698		
Aug	Sgts Pay	45	46.50	Can. Ass. Pay				20			
				AR1603 2nd C.C.R.C. 5/8	535						
				✓ 1868 ✓ 17/8	535						
				✓ 665 C.C.W. Q. Det. 9/8	535				9743		
Sept	Sgts Pay	45	46.50	C. A. P.				20	12243		
				AR2024 2nd C.C.R.C. 7/9	535						
				✓ 2128 ✓ 28/9	535						
				5MAR2088 ✓ 20/9	535				10638		
Oct	Sgts Pay	45	46.50	C. A. P.				20	13288		
				AR2213 2nd C.C.R.C. 4/10	560						
				✓ 2432 ✓ 20/10	560				12168		

(M.D.7) Ledger Balance 15862
R.P.C. Balance 11-4-57

P.T.O

NUMBER

69681

RANK

Sqr.

NAME

McINTYRE, H. G.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Balance					12168		
Nov	Sigs Pay	H8		C. A. P				20			
Dec	/	H650		/				20			
Jan	/	H650		AR 799 26 th BN	14/11	560					
				/ 874	20/11	2053					
				/ 4296 2 nd CCRC.	17/11	260					
				/ 1171 26 th BN	6/12	933					
				C. A. P				20	15862		
		138-				4106		60			
				AR 862 C. G. B. D	7/1	746					
				C. P. 9074 LONDON	17/1	12167					
				AR 2968 26 th BN C. R. A.	17/1	973					
				/ 3738	27/1	2433					
		--				16319		--	457		
	S. O. S to Canada			S. P. 24-17-2, 19							

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank *Sgt.* Name *Harold Nelson* Surname *McPherson*
Unit or Corps *U.S.A.* (If a soldier) Regt. No. *6981*
Born at *St. John N.B.* on date *Oct 28, 1896*
Signature (for identification) *H. McPherson*

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight *170* lbs. *None*
Height *6* ft. *6* ins.

2. NUTRITION AND DIATHESIS ?

Good, Phlegmatic

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM ?

Neg.

4. RESPIRATORY SYSTEM.

Neg.

5. HEART ?

Neg.
Abnormal Sounds? *no*
Abnormal Size? *no*
Pulse Rate? *80* Intermittence or irregularity? *no*

6. ARTERIES.—Any hardening ?

no

7. DIGESTIVE SYSTEM ?

Neg.

8. GENITO-URINARY SYSTEM ?

Neg.
Urinalysis—s.g.? *1.025* Reaction? *acid* Albumen? *Neg* Sugar? *Neg*

9. SKIN, MIDDLE EAR, EYE
or any other part ?

Neg.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined ?

Good

Examined at *St. John N.B.*

Signed *R. Nathan Capt.* M.O.

Date *29/1/19*

Signed *[Signature]* M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

St. John N.B. M.D. 13/3/19 *2200 West Coast Ave*

Medical Examination upon leaving the Service

Blanket for general service or a Soldier III for duty

That information should not be furnished to the public and should be kept confidential.

1. Name of Soldier: [Faint handwritten name]

2. Grade: [Faint handwritten grade]

3. Branch: [Faint handwritten branch]

4. Station: [Faint handwritten station]

5. Date of Examination: [Faint handwritten date]

6. Name of Physician: [Faint handwritten name]

7. Name of Surgeon: [Faint handwritten name]

8. Name of Assistant Surgeon: [Faint handwritten name]

9. Name of Assistant Surgeon: [Faint handwritten name]

10. Name of Assistant Surgeon: [Faint handwritten name]

11. Name of Assistant Surgeon: [Faint handwritten name]

12. Name of Assistant Surgeon: [Faint handwritten name]

13. Name of Assistant Surgeon: [Faint handwritten name]

14. Name of Assistant Surgeon: [Faint handwritten name]

15. Name of Assistant Surgeon: [Faint handwritten name]

16. Name of Assistant Surgeon: [Faint handwritten name]

17. Name of Assistant Surgeon: [Faint handwritten name]

18. Name of Assistant Surgeon: [Faint handwritten name]

19. Name of Assistant Surgeon: [Faint handwritten name]

20. Name of Assistant Surgeon: [Faint handwritten name]

21. Name of Assistant Surgeon: [Faint handwritten name]

22. Name of Assistant Surgeon: [Faint handwritten name]

23. Name of Assistant Surgeon: [Faint handwritten name]

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) McINTYRE, H. G.
 REGIMENT 26th Bn. RANK Sgt. No. 49681
 Date of Examination in England 29-1-19. Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 11-29
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

A. W. Turner
H. McIntyre

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada no
- (b) In England no
- (c) In France yes

Signature of Dental Officer R. H. Agnew
cap

[Faint, mostly illegible handwriting on the top half of the page, possibly including names and dates.]

[Faint handwriting on the bottom half of the page, including a list of items:]

- () In Gold
- () In Silver
- () In Copper

[Additional faint text and markings at the bottom of the page.]

M.D. No. 7

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Havelock St. Lancaster Heights, West St. John N.B. AUDITOR *P.S.A.* PAYMASTER *2*

M. OR S. **REGT. No. 69681** RANK **Sgt** NAME (IN FULL) **McIntyre, H. G.**
 NEXT OF KIN **96th Bn.** IF IN P.F. WHAT UNIT? **Empress of Britain**
 ADDRESS **St. John N.B.** TRANSFERRED TO **DATE 24/11/14** AUTHORITY **2595**
 IS SEPARATION ALLOWANCE PAID? **nil** DATE EFFECTIVE **No. 7 10 10 1-3-19**
 TO WHOM PAID **Mrs J Mc McIntyre** RELATIONSHIP **ANY CHANGE IN ASSIGNEE OR ADDRESS**
 ADDRESS **Havelock St W.**
 STOP PAYMENT FORM **St John N.B.** ASSIGNED PAY RENDERED, DATE **14-3-19** REASON **Demob.** AUTHORITY **S.O. 77** IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
Jan.																	Or bal Eng L.P.C. 31/19	
Feb	28	1.50	42.00		53.20			40.00		5.00			4.57	4.57	4.57		Sub 26 7/19-12 5/19 DO 60	
Mar.	14	1.50	21.00	35.00	42.00			105.00		4.87		20.00	69.87	21.24		* A.P. paid by outawa		
					56.00							2.37	107.37	72.61		* C.S.D.		
WAR SERVICE GRATUITY																		
																	Soldier	
																	13 days @ fin	
																	420	
																	420	
																	420.00	
																	420	
																	Non-effective	

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

CO13

June 1915

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20			
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m

PARTICULARS OF SEPARATION ALLOWANCE

No. *69681*

Rank *pte* Promoted Reverted Discharge

Soldier's Name *H. G. Mc Intyre*

Battalion *26 Battrn "A" Co*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Joseph Mc Intyre*

Address *Havelock St Lancaster*

Change of Address *West. St John N.B.*

1

2

3

4

*5270 Mc 20
S.K.*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					<i>Mo 67435 to Dec 1917</i>
<i>Dec 31</i>			<i>620</i>	<i>620</i>	
<i>Jan 18</i>	<i>S 66918</i>		<i>20</i>	<i>20</i>	
<i>Feb "</i>	<i>10 75402</i>		<i>20</i>	<i>20</i>	
<i>Mar "</i>	<i>9m 90411</i>		<i>20</i>	<i>20</i>	
<i>Apr</i>	<i>E 4045</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>May</i>	<i>9 18973</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>J 23454</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>L 30191</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>L 40928</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>2 45828</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct</i>	<i>7 53102</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov</i>	<i>8 58570</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Dec</i>	<i>1 67939</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Jan</i>	<i>1 74905</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Feb</i>	<i>2 79502</i>		<i>20</i>	<i>20</i>	<i>✓</i>
			<i>900</i>	<i>900</i>	

DM

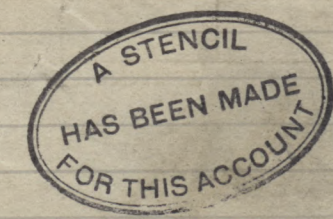
M. F. W. 128
400M-6-17-1772-39-1141
L. L. 22320-M. & D. 7983.

28-2-19

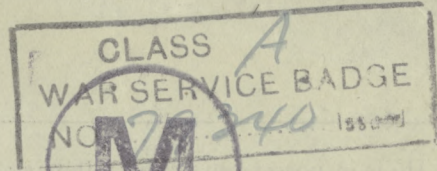
Ret'd per *Empress of Britain*

Date *25/2/19* F.X. *1-3-19*

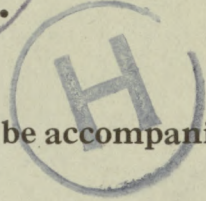
Clerk *Appender*



This space to be for numbers.



Proceedings on Discharge.



(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 69681	
Rank Sgt.	
Surname McIntyre	
Christian name Harold Gordon <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) D.D. 7	
Date of discharge 14/3/19	
Place of discharge St. John, N.B.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....19.....years.....1.....months.	Descriptive marks
Height.....5.....feet.....6.....inches.	
Complexion Light	
Eyes Blue	
Hair Light	
Trade Teamster	
Intended place of residence } St. John, N.B. <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of Demobilization Auth. R.O. 1420 Para.1. S.S/ "C" D/ 12-12-18 Authority for discharge.....	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc.
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... St. John, N.B......

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... St. John, N.B...... H. McInerney..... (Signature of Soldier.)

(Date)..... 14/3/19..... J. Paulings..... (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... St. John, N.B......

(Signature)..... Ra Major Capt.....

(Date)..... 14/3/19.....

O. C.
DISPERSAL STATION, ST. JOHN, N. B. FOR
O. C. DISTRICT DEPOT #7

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

I have no reservations to make

A. McIntyre

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.